

## DECLARATION AND POWER OF ATTORNEY

Docket No. 200,1402

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled:

METHOD OF TREATING AMYLOID & PRECURSOR DISORDERS

the specification of which (check one)

☒ is attached herein

☐ was filed on \_\_\_\_\_ as Application Serial No. \_\_\_\_\_ and was amended on \_\_\_\_\_

☐ I hereby authorize and request our attorneys, Davidson, Davidson & Kappel, LLC of 466 Seventh Avenue, New York, New York 10018 to insert here in parentheses (application number \_\_\_\_\_, filed \_\_\_\_\_) the filing date and application number of said application when known.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information that is known to me to be material to the patentability of this application as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign and/or provisional application(s) for patent or inventor's certificate listed below and have also identified below any foreign and/or provisional application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

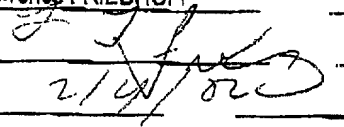
60/266,886	U.S.	05/02/2001	Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Number	Country	Day/Month/Year Filed	
			Priority claimed <input type="checkbox"/> Yes <input type="checkbox"/> No
Number	Country	Day/Month/Year Filed	

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT International filing date of this application:

Application Serial Number	Day/Month/Year Filed	Status
Application Serial Number	Day/Month/Year Filed	Status

And I hereby appoint Clifford M. Davidson, Reg. No. 32,728, Leslye B. Davidson, Reg. No. 38,854, Cary S. Kappel, Reg. No. 36,561, William C. Gehris, Reg. No. 38,156, Morey B. Wildes, Reg. No. 36,968, Robert J. Paradiso, Reg. No. 41,240, Erik R. Swanson, Reg. No. 40,833, Thomas P. Canty, Reg. No. 44,586, Livia S. Boyadjian, Reg. No. 34,781, and all other registered attorneys and agents at Davidson, Davidson & Kappel, LLC, U.S. Patent and Trademark Office Customer Number 23280, my attorneys, with full power of substitution and revocation, to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith; correspondence address: DAVIDSON, DAVIDSON & KAPPEL, LLC, 466 Seventh Avenue, 14th Floor, New York, New York 10018; Telephone: (212) 736-1940; Fax: (212) 736-2427.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor	Lawrence FRIEDHOFF
Inventor's signature	
Date	2/14/02
Residence	Hackensack, New Jersey
Post Office Address	401 Hackensack Ave. Hackensack, New Jersey 07601
Citizenship	United States of America

Full name of additional inventor	Joseph BUXBAUM
Inventor's signature	
Date	
Residence	New York, New York
Post Office Address	One Gustave Levy Place, Box 1230 New York, New York 10029
Citizenship	United States of America

☒ Additional inventors named on attached 1 sheet(s).

Page 1 of 2

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I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign and/or provisional application(s) for patent or inventor's certificate listed below and have also identified below any foreign and/or provisional application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

60/265,886	U.S.	05/02/2001	Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Number	Country	Day/Month/Year Filed	
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Application Serial Number	Day/Month/Year Filed	Status
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Full name of sole or first inventor	Lawrence FRIEDHOFF
Inventor's signature	
Date	
Residence	Hackensack, New Jersey
Post Office Address	401 Hackensack Ave. Hackensack, New Jersey 07601
Citizenship	United States of America

Full name of additional inventor	Joseph BUXBAUM
Inventor's signature	<i>J. Buxbaum</i>
Date	Feb 4, 2002
Residence	New York, New York
Post Office Address	One Gustave Levy Place, Box 1230 New York, New York 10029
Citizenship	United States of America

☒ Additional inventors named on attached 1 sheet(s).

Page 1 of 2



## DECLARATION AND POWER OF ATTORNEY

Docket No : 300,1042

Full name of additional inventor	Edward I. CULLEN
Inventor's signature	<i>Edward I. Cullen</i>
Date	2-4-02
Residence	Montvale, New Jersey
Post Office Address	23 Stuyvesant Rd. Montvale, New Jersey 07645
Citizenship	United States of America

Full name of additional inventor	
Inventor's signature	
Date	
Residence	
Post Office Address	
Citizenship	

Full name of additional inventor	
Inventor's signature	
Date	
Residence	
Post Office Address	
Citizenship	

Full name of additional inventor	
Inventor's signature	
Date	
Residence	
Post Office Address	
Citizenship	

Full name of additional inventor	
Inventor's signature	
Date	
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Full name of additional inventor	
Inventor's signature	
Date	
Residence	
Post Office Address	
Citizenship	

Full name of additional inventor	
Inventor's signature	
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Full name of additional inventor	
Inventor's signature	
Date	
Residence	
Post Office Address	
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